



Holiday Soccer Camps

Soccer Centers, located in Somerset, NJ just a half mile off exit 12 of Route 287, holds a full or half day program for players of every skill level. Players will be introduced to small-sided soccer games in which teams are rotated and changed every 15 minutes. Players will compete against one another and awards given out for each age group winner based on the individual's accomplishments. Ages U7 to U11- games session 9:00am to 11:45am; skills training session 12:45pm to 3:00pm. Ages U12 to U14 games session 12:15pm to 3:00pm; skills training session 9:00am to 11:15am. For those that sign up for the full day program, based on their age, the competition will be preceded or followed by a training session.

The Holiday soccer camp **dates** are November 4 and 5, 2004, December 27 to Dec 31, 2004, January 17, 2005, February 18 and 21, 2005, and March 28 to April 1, 2005. (No afternoon sessions on December 31, 2004)

Cost: \$30.00/game session; \$30.00/skills training session; \$195.00/week for Bridgewater Township Residents; \$225.00/week for Raritan Residents. Checks made payable to "Soccer Centers".

Space is limited; registration is based on first come first serve at the Bridgewater Recreation Department.

Three ways to register! In person at the Bridgewater Recreation Department (Municipal Building – 700 Garretson Road) 9am to 5pm Monday to Friday, drop registration off in the "REC" mailbox located around back of Municipal Building before or after office hours, or via postal service.

Bridgewater Recreation Department P.O. Box 6300/700 Garretson Road – Bridgewater, NJ 08807 (908) 725-6373 office hours 9am to 5pm Monday to Friday www.bridgewaternj.gov

2004/2005 Holiday Soccer Camps

checks payable to "Soccer Centers"

Last Name: _____		First Name: _____		Circle _____
Mailing Address: _____		Town: _____		Zip: _____
Home Phone #: () _____		Parent Work #: () _____		Gender: Male or Female
Parent Cell #: () _____		Parent E-mail Address: _____		
Date of Birth: ____/____/____		Current Age: _____		

\$30 half day / \$60 full day \$195 Bridgewater week / \$225 Raritan week		Check dates and sessions:			
<input type="checkbox"/> November 4, 2004	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon	<input type="checkbox"/> January 17, 2005	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon
<input type="checkbox"/> November 5, 2004	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon	<input type="checkbox"/> February 18, 2005	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon
<input type="checkbox"/> December 27, 2004	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon	<input type="checkbox"/> February 21, 2005	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon
<input type="checkbox"/> December 28, 2004	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon	<input type="checkbox"/> March 28, 2005	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon
<input type="checkbox"/> December 29, 2004	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon	<input type="checkbox"/> March 29, 2005	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon
<input type="checkbox"/> December 30, 2004	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon	<input type="checkbox"/> March 30, 2005	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon
<input type="checkbox"/> December 31, 2004	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon	<input type="checkbox"/> March 31, 2005	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon
			<input type="checkbox"/> April 1, 2005	<input type="checkbox"/> morning	<input type="checkbox"/> afternoon

Please note that Bridgewater Township Recreation Department does not provide individual medical coverage for its participants. Each participant will be covered under his/her family's medical policy. It is recommended that families have insurance before the child participates. The Recreation Department reserves the right to cancel, alter, supplement, limit registration or change any other information.

Parent/Guardian Signature

_____/_____/_____
Date

